



**Georgia-Pacific Corporation**

P.O. Box 337350  
N Las Vegas, NV 89033  
Telephone (702) 643-8100  
Fax (702) 643-2049

January 31, 2004

M/041/009  
M/015/072  
M/015/050\*

Darron Haddock  
Utah Division of Oil, Gas and Mining  
1594 West North Temple Suite 1210  
P.O. Box 145801  
Salt Lake City, UT 84114-5801

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**FEB 04 2005**

RE: G-P Gypsum Corporation  
Gypsum Quarries Annual Reports DIV. OF OIL, GAS & MINING  
M/041/009, M/015/072, M/015/050

Dear Mr. Hedberg:

Enclosed please find annual reports for 2004 for G-P Gypsum Corporation's gypsum quarries. Concerning maps, nothing has changed since the most recently submitted maps.

If you have any questions, or require additional information, I can be reached at 702-643-8100 x305.

Sincerely,

Russell Harms

Enclosure

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS AND MINING  
1594 West North Temple - Suite 1210  
Box 145801  
Salt Lake City, Utah 84114-5801  
Telephone: (801) 538-5291  
Fax: (801) 359-3940

ANNUAL REPORT OF MINING OPERATIONS

The informational requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1953, as amended, and the General Rules as promulgated under the Utah Minerals Regulatory Program. An operator conducting mining operations under a Notice of Intention must file an annual operations and progress report (FORM MR-AR) with the Division.

I. General Information

1. Report Time Period: From (mo./yr.) 1/04 To (mo./yr.) 12/04
2. DOGM File Number (Mine No): M 015 050
3. Mine Name: EAGLE CANYON QUARRY
4. Mineral(s) Mined (or permitted to mine): GYPSEUM
5. Type of mine: ☒ Surface Mine or ☐ Underground Mine
6. Legal Description (Location of Lands Affected):  
NW 1/4, SW 1/4, \_\_\_ 1/4, Section 19, Township 22S, Range 9E  
SW 1/4, SW 1/4, \_\_\_ 1/4, Section 19, Township 22S, Range 9E  
NE 1/4, SE 1/4, \_\_\_ 1/4, Section 19, Township 22S, Range 9E
7. Name of Operator or Company: G-P GYPSUM CORP (CLOSED)
8. Permanent Street Address: 200 S. STATE ST.  
City, State, Zip: SIGURD, UT 84657  
Phone: NA Fax: NA
9. Company Representative (or designated operator):  
Name: TOM BROOKS  
Title: PLANT MANAGER  
Business Address: P.O. Box 337350  
City, State, Zip: N. LAS VEGAS, NV 89033  
Phone: 702 645 8100 Fax: 702 643 2049  
☐ Please check if any of the above information has changed since previous year.

II. Mining and Reclamation

1. Was there any mine related activity during the past year? Yes ☐ No ☒
2. If no - what was the last year of activity? 2002
3. If yes - how much ore or mineral was mined? \_\_\_\_\_

Revised  
2/20/05  
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DIV OF OIL GAS & MINING

4. Briefly describe the type of work performed, volume of material moved, and any new or additional surface disturbances that occurred during the past year.

NO ACTIVITY

5. How much **additional acreage** was disturbed during the past year? 0
6. How much acreage was **reclaimed** during the past year? 0
7. Briefly describe the reclamation work performed during the past year. This description should include methods employed, and an evaluation of the results.

NO RECLAMATION

8. What is the **total** disturbed acreage of entire project at years end? 42
9. Briefly summarize any mining and/or reclamation plans for the upcoming year.

POSSIBILITY OF MINING AND/OR RECLAMATION  
LATER IN YEAR

**NOTE:** Section III., "Additional Information" applies only to **large mining operations**.

III. Additional Information - R647-4-121.2 and .3

1. **The operator shall include an updated map depicting surface disturbance and reclamation performed during the year, prepared in accordance with Rule R647-4-105.**
2. The operator shall keep and maintain timely records relating to his performance under the Act, and shall make these records available to the Division upon request.

IV. Signature Requirement

**I hereby certify that the foregoing is true and correct.**

Name (Typed or Print): THOMAS C. BROOKS

Title of Operator: PLANT MANAGER

Signature of Operator: 

Date: 01-31-05